

**FOREIGN
LIMITED LIABILITY PARTNERSHIP**

STATE OF MAINE

**NOTIFICATION BY REGISTERED AGENT
OF CHANGE IN NAME
OR REGISTERED OFFICE**

(Name of Limited Liability Partnership)

- ☐ Names of additional limited liability partnerships, to which a copy of this notice has been sent to a partner, are attached hereto as Exhibit ____, and made a part hereof.

Filing Fee \$30.00 for each limited liability partnership listed

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

Pursuant to 31 MRSA §854.3.B., the undersigned gives notice of a change of registered agent's name and/or registered office **address** of each limited liability partnership listed herein:

FIRST: Name of registered agent appearing on the record in the Secretary of State's Office _____

SECOND: New name of registered agent (if no change, so indicate) _____

THIRD: Address of registered office appearing on the record in the Secretary of State's office

(street, city, state and zip code)

FOURTH: New address of registered office (if no change, so indicate)

(physical location - street (not P.O. Box), city, state and zip code)

(mailing address if different from above)

DATED _____

REGISTERED AGENT*

(signature)

(type or print name)

For Registered Agent which is a Corporation

Name of Corporation _____

By _____
(authorized signature)

(type or print name and capacity)

*Certificate **MUST** be signed by the **registered agent** (§854.3.B.).

The execution of this certificate constitutes an oath or affirmation under the penalties of false swearing under Title 17-A, **section** 453.

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**